

EDITORIAL

Dear Colleagues,

The COVID-19 pandemic has created a multifaceted global crisis and the impact on the education system has been significant. Many schools around the world were closed to reduce transmission of the disease, which had a substantial effect on students, educators, and administrators. Distance learning in higher education is now no longer a choice, but an obligation. It was resolved on March 26, 2020 by the Council of Education that all university education providers in Turkey would transition to only offering online classes. The abrupt transformation to an exclusively digital environment created a new and different experience that was unfamiliar and challenging. It is well known that face-to-face teaching plays a significant role in cognitive and social development. Many concerns were raised, including questions regarding the distance education infrastructure and the number and capabilities of instructors.

The main point of discussion has been the delivery of compulsory programs. As in other health field programs, applied courses, which are a critical component of nursing education, should not be offered only through distance education and this work should be compensated. It is important to acknowledge that training the nursing workforce solely online may have adverse effects on public health and our profession in the long term.

The Psychiatric Nurses Association's leadership held two workshops to exchange views on how the psychiatric nursing course should be delivered in the current environment in order to create a common language and determine a road map. The discussion included the objectives, content, teaching methods, and assessment of theoretical knowledge, skill level, and clinical/field practice for mental health and psychiatric nursing units delivered online. Classes related to psychological first aid and coping with mental health problems during a pandemic were added to the theoretical content, and training that includes active web-based learning techniques was emphasized. It was also highlighted that faculty members need to learn or improve their use of new measurement tools and teaching techniques to adjust to the new environment.

The first workshop assessed potential adaptation of the existing coursework to distance education, and how well it has been and could be realized was reviewed in the second meeting. It was revealed that most goals and objectives had been achieved; however, critical problems of limited Internet access and difficulties ensuring active student participation and attendance remain. Most of the faculty members had already participated in distance education certificate programs and many shared their knowledge of successful techniques and web-based learning methods and assessment tools.

For example, it was suggested that simulation scenarios designed according to the teaching objectives, as well as discussion of films, documentaries, TV series, and articles on mental health and illness, and group discussion of specific cases could serve as teaching and learning tools that could be used at a distance. The importance of inviting nurses currently working in psychiatric clinics to speak to the class was also noted. In addition, it was observed that techniques such as checklists, short quizzes, and multiple-choice tests could easily be used online.

The COVID-19 pandemic is an ongoing public health crisis. We must now review several concepts, including equality, leadership, social justice, ethics, and nursing care, and develop strategies to strengthen significant these areas in nursing education given the present circumstances. The continuation of the pandemic has led to substantive changes in the education environment. Sharing studies of the experiences and effectiveness of online psychiatric nursing education in the Journal of Psychiatric Nursing could be of great benefit to our profession. It is imperative to revise the targets and develop effective strategies.

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